

## **Supplemental Application Data Sheet**

### **Application Information**

|                                  |   |
|----------------------------------|---|
| Application number::             | 10/666,423  |
| Filing Date::                    | 09/19/03  |
| Application Type::               | Regular   |
| Subject Matter::                 | Utility   |
| Suggested Group Art Unit::       | 1647  |
| CD-ROM or CD-R?::                | None  |
| Sequence submission?::           | None  |
| Computer Readable Form (CRF)?::  | No  |
| Title::                          | SYNTHETIC IMMUNOGENIC BUT NON-<br>AMYLOIDOGENIC PEPTIDES<br>HOMOLOGOUS TO AMYLOID BETA FOR<br>INDUCTION OF AN IMMUNE RESPONSE TO<br>AMYLOID BETA AND AMYLOID DEPOSITS |
| Attorney Docket Number::         | 05986/100K433-US2   |
| Request for Early Publication?:: | No  |
| Request for Non-Publication?::   | No  |
| Suggested Drawing Figure::       | 1   |
| Total Drawing Sheets::           | 6   |
| Small Entity?::                  | Yes   |
| Petition included?::             | No  |
| Secrecy Order in Parent Appl.?:: | No  |

### **Applicant Information**

|                               |               |
|-------------------------------|---------------|
| Applicant Authority Type::    | Inventor      |
| Primary Citizenship Country:: | US            |
| Status::                      | Full Capacity |
| Given Name::                  | Blas          |

Family Name:: Frangione  
City of Residence:: New York  
State or Province of Residence:: NY  
Country of Residence:: US  
Street of mailing address:: 330 East 38th Street, Apt. 35B  
City of mailing address:: New York  
State or Province of mailing address:: NY  
Postal or Zip Code of mailing address:: 10016

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Iceland  
Status:: Full Capacity  
Given Name:: Einar  
Middle Name:: M.  
Family Name:: Sigurdsson  
City of Residence:: Scarsdale  
State or Province of Residence:: NY  
Country of Residence:: US  
Street of mailing address:: 23 Downer Avenue  
City of mailing address:: Scarsdale  
State or Province of mailing address:: NY  
Postal or Zip Code of mailing address:: 10583

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Thomas  
Family Name:: Wisniewski  
City of Residence:: Staten Island  
State or Province of Residence:: NY

Country of Residence:: US  
Street of mailing address:: 86 Ward Avenue  
City of mailing address:: Staten Island  
State or Province of mailing address:: NY  
Postal or Zip Code of mailing address:: 10304

### **Correspondence Information**

Correspondence Customer Number:: 07278

### **Representative Information**

Representative Customer Number:: 07278

### **Domestic Priority Information**

| Application::    | Continuity Type::                                       | Parent Application:: | Parent Filing Date:: |
|------------------|---|----------------------|----------------------|
| This Application | Division of   | 09/861,847           | 05/22/01             |
| 09/861,847       | An application claiming the benefit under 35 USC 119(e) | 60/205,578           | 05/22/00             |

### **Foreign Priority Information**

### **Assignee Information**

Assignee name:: New York University  
Street of mailing address:: 70 Washington Square South  
City of mailing address:: New York  
State or Province of mailing address:: NY  
Postal or Zip Code of mailing address:: 10012